

**NEBRASKA DEPARTMENT
OF HEALTH AND HUMAN SERVICES**

**GOVERNOR'S SAFE AND DRUG FREE SCHOOLS
AND COMMUNITIES PROGRAM**

**2004-2005
REQUEST FOR APPLICATIONS**

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GOVERNOR'S SAFE AND DRUG FREE SCHOOLS AND COMMUNITIES PROGRAM

Alcohol, Drug Abuse and Violence Prevention Program

SECTION I: INTRODUCTION

The goal of this Request for Applications (RFA) is to strengthen community-based substance abuse prevention efforts directed at 1) reducing alcohol, tobacco, and other drug use by youth; and, 2) increasing safe school and community environments through strong violence prevention efforts. This program is authorized under the Safe and Drug-Free Schools and Communities Act of 1994. Section 4001. The Catalog of Federal Domestic Assistance number is 84.186B. The application outline and instructions have been designed to provide a standardized format to aid reviewers in comparing proposals and to assist applicants in designing and organizing an effective project. Awards will be made for a ten-month budget period from December 1, 2004 through September 30, 2005. **Applicants can apply for a Safe and Drug Free Schools and Communities grant in any amount starting at \$2,500 but not exceeding \$25,000.** **Applicants requesting a level of funding that falls outside these parameters must provide significant and convincing justification for the requested funding amount.**

SECTION II: APPLICATION GUIDANCE

PART A: Goals and Funding Priorities

1. Goals

The goals of the Governor's Safe and Drug-Free Schools and Communities program are to 1) decrease the number of youth who engage in substance abuse and/or violence, 2) delay the age when youth begin to use alcohol, tobacco, and other drugs, 3) improve academic achievement, 4) promote positive adult/youth relationships, and 5) provide necessary community supports for youth both before and after school.

2. Funding Priorities

- A. Primary Prevention:** Only applications that have a primary prevention focus will be reviewed as eligible for the Governor's Safe and Drug Free Schools and Communities program. Primary Prevention means the program will encourage youth to continue to not use alcohol, tobacco and other drugs, and will encourage problem-solving, non-violence, and tolerance for others. Programming will occur over an extended period of time, include strong adult leadership, and encourage youth leadership development in the community.
- B. Principles of Effectiveness:** In accordance with regulations under the January, 2002 reauthorization of No Child Left Behind (NCLB), the federal authorizing legislation for the Safe and Drug Free Schools and Communities program, programs funded under the Safe and Drug Free Schools and Communities (SDFSC) program **MUST** be used for primary prevention activities that support academic achievement and focus

on producing positive outcomes related to youth beliefs, attitudes, knowledge and behaviors regarding violence and alcohol, tobacco and other drug abuse. ***In addition, programming funded under SDFSC must address the U.S. Department of Education's Principles of Effectiveness*** ("No Child Left Behind Act of 2001," Section 4115):

(a) PRINCIPLES OF EFFECTIVENESS-

(1) IN GENERAL- For a program or activity developed pursuant to this subpart to meet the principles of effectiveness, such program or activity shall —

- (A) be based on an assessment of objective data regarding the incidence of violence and illegal drug use in the elementary schools and secondary schools and communities to be served, including an objective analysis of the current conditions and consequences regarding violence and illegal drug use, including delinquency and serious discipline problems, among students who attend such schools (including private school students who participate in the drug and violence prevention program) that is based on ongoing local assessment or evaluation activities;
- (B) be based on an established set of performance measures aimed at ensuring that the elementary schools and secondary schools and communities to be served by the program have a safe, orderly, and drug-free learning environment;
- (C) be based on scientifically based research that provides evidence that the program to be used will reduce violence and illegal drug use;
- (D) be based on an analysis of the data reasonably available at the time, of the prevalence of risk factors, including high or increasing rates of reported cases of child abuse and domestic violence; protective factors, buffers, assets; or other variables in schools and communities in the State identified through scientifically based research; and
- (E) include meaningful and ongoing consultation with and input from parents in the development of the application and administration of the program or activity.

(2) PERIODIC EVALUATION-

- (A) REQUIREMENT- The program or activity shall undergo a periodic evaluation to assess its progress toward reducing violence and illegal drug use.
- (B) USE OF RESULTS- The results shall be used to refine, improve, and strengthen the program, and to refine the performance measures.

C. Science-Based Programming

- 1). **Risk and Protective Factors**: The term "Risk and Protective Factors" refers to a set of underlying conditions that have been scientifically-validated (J. David Hawkins and Richard F. Catalano, University of Washington) as contributing to (in the case of **risk factors**), or safeguarding against (in the case of **protective factors**), substance abuse by youth. Some generalizations about risk and protective factors include the following:
 - a) The more risk factors that are present, the greater the risk. While it may not be possible to address every single risk factor that is present, reducing the overall number of risk factors can have a significant impact on future problem behaviors.
 - b) Risk factors show the same effect across different races, cultures and classes.
 - c) Protective factors buffer risk. Therefore, increasing the presence of protective factors can have a positive affect on the problem behavior the program is trying to change.

- d) Reversing risk factors does not make them protective factors. For example, “parental involvement in the problem behavior” is a validated risk factor and a legitimate program goal, then, might be to decrease *(because risk factors are always to be decreased)* the number of parents who allow youth to drink at their homes. A goal to increase the number of parents who do not allow youth to drink in their homes, although similar in nature to the previous goal, does not meet risk and protective factor criteria because “lack of parental involvement in the problem behavior” is not a validated protective factor *(and protective factors are always to be increased)*.
- e) The only protective factors that have been validated by Hawkins’ and Catalano’s research all relate to *bonding*. To build bonding, three conditions are necessary: opportunities, skills and recognition.

Applicants must identify the risk and protective factors that the programming is designed to address. A list of the scientifically-validated risk and protective factors is included as Attachment F.

- 2). **Domains:** In prevention, the term “Domain” refers to the following social/physical arenas of individual interaction and life activity: 1) Individual, 2) Family, 3) Peer, 4) School, 5) Community, and 6) Society/Environmental. In the Hawkins and Catalano model, risk and protective factors are organized into the following four important “domains” of a young person’s life:
 - a) Individual/Peer
 - b) Family
 - c) School
 - d) Communities

Research has shown that substance abuse prevention programs that are comprehensive (e.g. provide interventions across multiple domains) are more likely to be successful. ***Applicants are encouraged to design comprehensive programs, and must identify the domains in which the programming will be provided.*** Attachment F provides a list of the risk and protective factors organized by domain.

- 3). **Key Indicators:** The following indicators have been determined to be of primary importance in substance abuse and violence prevention:
 - a) The incidence rate of violence and/or substance abuse
 - b) The prevalence rate of violence and/or substance abuse
 - c) The age of onset of violence and/or substance abuse
 - d) The perception by youth of the health risks associated with violence and/or substance abuse
 - e) The perceptions by youth of social disapproval of violence and/or substance abuse.

Applicants are encouraged to design programs that reduce incidence and prevalence rates, delay age of onset, and increase perceptions of health risks and social disapproval. ***Applicants must identify the key indicators that will be addressed, and explain how baseline and outcome data for those indicators will be collected.***

- 4). **Evidence-Based Strategies:** The term evidence-based strategies refers to programs, policies and/or practices that have been officially validated by an

expert consensus process as being effective. Minimum criteria for establishing scientific defensibility is met when the effectiveness of the program, policy or practice has been validated through a formal evaluation process that was subsequently published in a peer-reviewed journal. ***All applicants are required to note whether the proposed programming and interventions have been validated as being evidence-based.*** Funding priority will be given to those applicants that are able to document the use of evidence-based programs, policies or practices.

3. Priority Populations

The Governor's Safe and Drug Free Schools and Communities Program will recognize the following populations as priority service populations for these funds:

- A. Children and youth not normally served by State and Local Educational Agencies.
- B. Populations that need special services or additional resources (preschoolers, youth in detention facilities, runaway or homeless youth, pregnant and parenting teenagers, and school dropouts.)
- C. Economically disadvantaged youth.
- D. Programs which involve both youth and parents in alcohol, tobacco, and other drug prevention activities.

4. State Performance Measures

All Applicants must address—and if funded document outcomes for—at least one of the following State SDFSC Performance Measures:

- A. Ten percent reduction in the number of violent incidence among youth
- B. Ten percent reduction in substance abuse among youth
- C. Twenty-five percent increase in social disapproval by youth of violence and/or substance abuse

Documentation must be provided through a formal, evidence-based evaluation process that meets SDFSC evaluation criteria

PART B: Eligibility

Subgrants may be awarded to public and private nonprofit entities. Eligible applicants may include but are not limited to: local or tribal public health, mental health, and substance abuse agencies and community-based organizations. Any community-based organization applying under this announcement must have been certified by the Federal Internal Revenue Service as a 501(c)(3) organization prior to April 1, 1998, or be certified by the state as a nonprofit agency.

Tribal applicants must be tribal councils or entities applying under an approved tribal resolution.

PART C: Program Requirements

1. Authorized Applicant Activities

- A. **In General:** Grantees may use SDFSC funding to develop, implement, and evaluate comprehensive programs and activities, which are coordinated with other school and community-based services and programs, and which:

- 1). Foster a safe and drug-free learning environment that supports academic achievement;
- 2). Are consistent with the Principles of Effectiveness; and
- 3). Are designed to:
 - a) prevent or reduce violence; the use, possession and distribution of illegal drugs; and delinquency;
 - b) create a well disciplined environment conducive to learning, which includes consultation between parents and school personnel to identify early warning signs of drug use and violence
 - c) promote the involvement of parents in the activity or program
 - d) promote coordination with community groups, coalitions and government agencies

B. Specific Authorized Activities: Governor's Safe and Drug Free Schools and Communities Program priorities have been established in cooperation with the Department of Education, the Governor's Office, and the Department of Health and Human Services' Office of Mental Health, Substance Abuse, and Addiction Services (OMHSAAS) under guidelines supplied by the U.S. Department of Education. SDFSC grantees may use SDFSC funds to carry out activities that comply with the U.S. Department of Education's Principles of Effectiveness, including:

- 1). Age-appropriate and developmentally-based activities that:
 - a) address the consequences of violence and the illegal use of drugs, as appropriate;
 - b) promote a sense of individual responsibility;
 - c) teach youth that most people do not illegally use drugs;
 - d) teach youth to recognize social and peer pressure to use drugs illegally and the skills for resisting illegal drug use;
 - e) teach youth about the dangers of emerging drugs; and
 - f) engage youth in the learning process
- 2). Activities that involve families, community sectors (which may include appropriately trained seniors), and a variety of drug and violence prevention providers in setting clear expectations against violence and illegal use of drugs and appropriate consequences for violence and illegal use of drugs.
- 3). Dissemination of drug and violence prevention information to schools and the community.
- 4). Professional development and training for, and involvement of, school personnel, pupil services personnel, parents, and interested community members in prevention, education, early identification and intervention, mentoring, or rehabilitation referral, as related to drug and violence prevention.
- 5). Drug and violence prevention activities that may include the following:
 - a) Community-wide planning and organizing activities to reduce violence and illegal drug use, which may include gang activity prevention.
 - b) Conflict resolution programs, including peer mediation programs that educate and train peer mediators, and youth anti-crime and anti-drug councils and activities.
 - c) Alternative education programs or services for violent or drug abusing students that reduce the need for suspension or expulsion or that serve students who have been suspended or expelled from the regular educational settings, including programs or services to assist students to

- make continued progress toward meeting the State academic achievement standards and to reenter the regular education setting.
- d) Counseling, mentoring, referral services, and other youth assistance practices and programs.
 - e) Programs that encourage youth to seek advice from, and to confide in, a trusted adult regarding concerns about violence and illegal drug use.
 - f) Drug and violence prevention activities designed to reduce truancy.
 - g) Age-appropriate, developmentally-based violence prevention and education programs that address victimization associated with prejudice and intolerance, and that include activities designed to help youth develop a sense of individual responsibility and respect for the rights of others, and to resolve conflicts without violence.
 - h) Developing and implementing character education programs, as a component of drug and violence prevention programs, that take into account the views of parents of the youth for whom the program is intended.
 - i) Community service, including community service performed by expelled students, and service-learning projects.
 - j) Programs to train school and community personnel to identify warning signs of youth suicide and to create an action plan to help youth at risk of suicide.
 - k) Programs that respond to the needs of youth who are faced with domestic violence or child abuse.
- 6). The evaluation of any of the activities authorized under this subsection and the collection of objective data used to assess program needs, program implementation, or program success in achieving program goals and objectives.

2. HHS Activities

- A. Consultation and Technical Assistance:** The Department of Health and Human Services will provide consultation and technical assistance in planning, operating, and evaluating prevention activities. HHS will provide consultation and technical assistance both directly and indirectly, through HHS staff and other technical assistance providers under contract to the Department of Health and Human Services. HHS will make available research-based substance abuse prevention studies; information on promising prevention programs, policies and practices; and local resource libraries that can assist applicants.
- B. Program Monitoring:** Program monitoring and evaluation is key to achieving outcomes. HHS will provide ongoing monitoring of each grantee's performance of program activities and progress toward goals and outcomes through monthly financial reporting and quarterly program reporting from grantees, as well as site visits and other means of communication.

3. Program Specific Requirements

- A.** All materials produced with Governor's Safe and Drug Free Schools and Communities Dollars must state "This project is supported by the federal Safe and Drug Free Schools and Communities program, through funding awarded by the Governor's Office and the Nebraska Department of Health and Human Services."

- B.** Grantee must comply with all program specific reporting requirements, including monthly Expenditure Reports and Quarterly Progress Reports (Attachments C-1 through C-6).
- C.** Funds may not be used for equipment, capitol outlays, construction, or to provide medical services, treatment services, or rehabilitation.

PART D: Use of Funds and Reporting Requirements

1. Use of Funds

Funds available under this announcement must support primary prevention activities. No funds can be used to assess people for treatment or provide substance abuse treatment services. In addition, funding may not be used to purchase equipment; to fund capitol outlays or construction; or for medical, treatment or rehabilitation services. Although applicants may contract with other organizations, applicants must perform a substantial portion of the activities (including program management and operations and delivery of prevention services) for which funds are requested. Applicants must comply with the Administrative and Audit Guidance for HHS, and the certifications included as Attachments D-1 and D-2.

2. Expenditure and Progress Reporting Requirements

Quarterly narrative progress reports will be required 10 days after the end of each quarter. Quarterly progress report should document services provided; progress toward goals, objectives and outcomes; any problems encountered; and plans for resolving problems encountered. Progress reports should follow SDFSC reporting guidelines included in this application kit as Attachments C-3 through C-6.

Monthly Expenditure Reports and Reimbursement Requests must be filed with the HHS Office of Mental Health, Substance Abuse and Addiction Services by the 10th of the month following the month in which expenses were incurred. Requests must be based upon actual expenditures and must conform to the applicant budget. Monthly Expenditure Reports and Reimbursement Requests should follow the reporting guidelines included in this application kit as Attachments C-1 through C-2.

PART E: Technical Assistance

To obtain Technical Assistance from HHS to assist you in preparing your application, call Faith Mills at (402) 479-5576.

SECTION III: APPLICATION INSTRUCTIONS

PART A: Requirements for Submission

1. Deadline

Completed, signed applications are due no later than 4:00 p.m. (CST) November 15, 2004. Facsimile (FAX) copies will not be accepted.

2. Checklist

The checklist should reflect that all requirements for a complete application have been met at the time the application is submitted (Attachment A).

3. Table of Contents

Each application must contain a table of contents which clearly identifies the required application components.

4. Preparation and Mailing Instructions

Applicants are required to submit an unbound original and six (6) copies of the application. Copies may not be stapled or double-sided. Applications must not be placed in binders or folders and must not include brochures and attachments. Each page of the application must be sequentially numbered. Narrative sections must be typed on 8 1/2" by 11" paper.

Applications are to be mailed to:

Faith Mills
Office of Mental Health, Substance Abuse and Addiction Services
Department of Health and Human Services
P. O. Box 98925
Lincoln, NE 68509-8925

If hand delivering or sending by Federal Express send to:

Faith Mills
OMHSAAS
Department of Health and Human Services
HHS West Campus
Folsom Street and West Prospector
Lincoln, NE 68522

The cost of preparing the response to this RFA is the responsibility of the applicant agency.

PART B: Face Page

Each applicant must submit a Face Page using the form provided in Attachment B-1 of this RFA. Briefly summarize the program for which funds are requested, including: the target population to be served; program goals, objectives and outcomes, and the services to be provided.

PART C: Proposed Program Outline

Applications submitted to the Department of Health and Human Services (HHS) must follow the outline described below, and adhere to the noted headings and page limitations.

1. Agency Description *(not to exceed 1 page)*

The agency description should include the overall purpose/mission of the organization, estimated number of people served annually by the organization, information on how long the organization has been in existence, and a description of the organization's structure and leadership (including executive staff and the composition of any advisory and governing boards). In addition, the description should document existing programs and services offered by the agency, agency experience in working with the target population identified in the proposal, cultural competency, and capacity to administer federally-funded programs.

2. Justification of Proposed Program and Target Population *(not to exceed 1 page)*

Clearly and specifically describe the priority populations to be served through the proposed program, including the approximate number of youth to be reached and the risks they face with regard to violence, alcohol and other drug use. Include information about the geographic area to be served, as well as socio-cultural, economic, age and educational characteristics of the target population to be served. If the project includes efforts with parents or supportive adults, explain how service delivery to those populations will be linked to the substance abuse prevention efforts involving youth. Explain how the program will address unmet needs or barriers to service.

3. Plan of Operation: Type and Purpose of Proposed Project *(Limit to 8 pages)*

This section should describe the applicant's proposed program with specific information on the program's goals, objectives and identified outcomes, as well as the major services to be delivered.

- A. Program Description:** Clearly summarize the program goals, objectives, outcomes and substance abuse or violence prevention services to be provided, and their logical linkages to one another. Include a justification for using the proposed service activities with the specific target population. Identify whether the program goal(s) address any or all of the following key indicators: the incidence rate of violence and/or substance abuse, the prevalence rate of violence and/or substance abuse, and the age of onset of violence and/or substance abuse. Identify whether the objectives address either or both of the following key indicators: the perception by youth of the health risks associated with violence and/or substance abuse, and/or the perceptions by youth of social disapproval of violence and/or substance abuse. Identify the risk and protective factors that the programming is designed to address, as well as the domains in which the programming will be provided. Document the use of evidence-based, programs, policies or practices. Describe how the proposed services are 1) respectful of the cultural norms, values, and traditions of the target populations, 2) developmentally appropriate, and 3) linguistically specific. Explain how the programming meets the U.S. Department of Education's "Principles of Effectiveness." Describe how the youth input was or will be utilized in program design and/or implementation. Describe how the program will provide youth with stable and supportive adult relationships over time.

B. Work Plan: Provide specific information on program goals, objectives, outcomes and activities, and outline the time line for program implementation on the provided Work Plan form (Attachment B-2).

- 1). State the overall **goal(s)** of the program. (Goals are defined as broad statements of what the program seeks to accomplish and for whom, and should relate to the purpose of the Funding Priorities for this RFA.)
- 2). Provide a list of specific **objectives** to be achieved in order to accomplish the goal(s) of the project, including target dates where appropriate.
- 3). Describe the specific, measurable **outcomes** to be produced through the programming. (Outcomes are descriptions of the extent of change that will occur as a result of the programming.)
- 4). Outline **activities** or steps that need to be delivered to achieve each of the stated outcomes, and indicate staff responsible for implementation.
- 5). Develop a **time line** that describes activities required to accomplish the objectives of the project. (The time line will serve as a tool for implementation and monitoring).
- 6). Note **responsible staff** for each activity.
- 7). Describe the process and outcome **evaluation** components that will be used to monitor program implementation and outcomes.

4. Plan of Evaluation *(not to exceed 1 page)*

The applicant is required to submit a plan for how the project will be monitored and evaluated for 1) continuous improvement, and 2) to determine whether project objectives and outcomes are being achieved. The applicant should clearly describe how it will monitor activities and measure progress toward attaining outcomes during the project year. Appropriate process and outcome measures should be described. In addition, the applicant should explain how baseline and outcome data for risk and protective factors and key indicators will be collected. The plan should also describe the information and other data that will be collected, and describe how continuous improvement will be achieved.

5. Plan of Collaboration *(not to exceed 1 page)*

Describe current collaboration efforts with other agencies and/or community groups serving the identified target population(s) (collaborating organizations may include universities, local health departments, Regional Prevention Centers, community-based organizations, and community groups). Identify agencies and other partners that will be engaged in the proposed programming. Describe how the proposed services will be coordinated, and how they fit into the existing substance abuse and violence prevention service system provided by other organizations and agencies. Describe youth and community input into program design and/or implementation. Describe how the applicant will work with the Regional Prevention Centers serving their geographic area (service area and contact information for the Regional Prevention Centers is included as Attachment G).

PART D: Budget and Budget Narrative

Applicants must prepare a Project Budget Summary (included as Attachment B-4), as well as a detailed Project Budget (provided in Attachment B-3). The budget request must be clearly linked to the goals, objectives, outcomes and services proposed for the budget period **December 1, 2004 – September 30, 2005**. In addition, applicants must also complete a Budget Narrative (Attachment B-5) which provides supportive description and justification for each line item; describes the applicant's ability to leverage structural and financial resources at the community and private sector levels; describes the applicant's ability to track, manage and administer federal grant funds; and describes plans for sustaining the program beyond the grant period.

A line item for any subcontractor must be included. Applicants should name the subcontractor, describe the services to be performed, and provide a breakdown of and justification of the proposed costs. Any costs included in the indirect cost rate cannot be listed under "other direct costs." The negotiated indirect cost agreement must be submitted with Required Documentation if the indirect cost rate is included as a budget line item.

PART E: Required Documentation

The following items must be included with each application:

- A. Completed Checklist
- B. Signed Governor's Safe and Drug Free Schools and Communities Face Page indicating funds requested; organizational information; project abstract briefly describing the agency; summary of goals, objectives and outcomes of the proposed project; target population to be served; and signature of authorized official agreeing to comply with subgrant terms and assurances.
- C. Signed Certifications:
 - 1). Certification Regarding Lobbying
 - 2). Certification Regarding Environmental Tobacco Smoke
- D. Copy of negotiated indirect cost agreement, if applicable.

PART F: Review and Evaluation Criteria

Applications submitted in response to this RFA will be evaluated based on the following criteria:

1. Face Page: Completeness

2. Proposed Program Outline:

A. Agency Description:

Does the applicant define its agency's mission and describe existing programs and services? Does the applicant have experience in working with at-risk populations? Does the applicant describe their process for receiving and expending grant funds? Does the applicant define both a process for hiring and monitoring staff and for reporting on proposed program activities? Does the applicant clearly demonstrate staff capacity to respond to cultural, gender, environmental, social and multilingual attributes of their target population? Does the applicant describe internal capacity and adequate staffing?

B. Justification of Proposed Program

- 1). **Target Population:** Does the applicant describe the target population and estimate number of individuals to be served? Does the applicant describe the risk for alcohol, tobacco, and other drug use or the risk for violence the target population faces? Do the prevention strategies proposed by the applicant address the demographics and specific needs of the target population? Does the applicant include information about the geographic area to be served, as well as socio-cultural, economic, age, and educational characteristics of the target population to be served? If the project includes efforts with parents or supportive adults, does the applicant explain how service delivery to those populations will be linked to the substance abuse prevention efforts involving youth?
- 2). **Needs of the Target Population:** Does the proposed program meet an unmet need? Does the applicant identify gaps in services and barriers to the provision of alcohol, tobacco, and other drug prevention services to this population? Does the applicant describe how gaps and unmet needs would be met by the proposed services to be delivered? Does the applicant clearly document the need for continuation of an existing program?

C. Plan of Operation

- 1). **Program Description:** Does the applicant clearly summarize the program goals, objectives, outcomes and substance abuse or violence prevention services to be provided, and their logical linkages to one another? Does the applicant include a justification for using the proposed service activities with the specific target population? Is it clear what behaviors will be impacted by the prevention services proposed? Do the program goal(s) address reducing or delaying any or all of the following key indicators: the incidence rate of violence and/or substance abuse, the prevalence rate of violence and/or substance abuse, and the age of onset of violence and/or substance abuse? Does the applicant identify whether the objectives address either or both of the following key indicators: the perception by youth of the health risks associated with violence and/or substance abuse, and/or the perceptions by youth of social disapproval of violence and/or substance abuse? Does the applicant identify risk and protective with interventions and programming planned across multiple domains? Is the program design comprehensive, with interventions and programming planned across multiple domains? Does the applicant document the use of evidence-based, programs, principles or practices? Does the programming meets the U.S. Department of Education's "Principles of Effectiveness"? Does the program utilize youth input and ownership with regard to program design and implementation? Does the program provide youth with stable and supportive adult relationships over time? Does the applicant describe how the services to be delivered are respectful of cultural norms, sexual identity, developmental levels and language, as appropriate?
- 2). **Work Plan:** Does the applicant clearly lay out logically-linked goal(s), objectives, outcomes, activities, time line, responsibilities, and evaluation plans? Are the outcomes specific, time-phased and measurable? Are the objectives clearly related to the attainment of the program's proposed goals? Does the applicant clearly define the steps needed to reach the outcomes?

D. Plan of Evaluation

Is the applicant's evaluation plan adequate for measuring progress toward attaining outcomes and enabling continuous improvement? Does the evaluation include both process and outcome measures? Does the applicant identify the risk and protective factors and key indicators that will be addressed, and explain how baseline and outcome data for those factors and indicators will be collected? Does the plan describe how and what other kinds of data or information will be collected and evaluated? Does the evaluation plan meet the "Principles of Effectiveness" criteria established by the U.S. Department of Education?

E. Plan of Collaboration

Does the applicant describe current collaboration efforts and identify the organizations with which it will collaborate on the proposed program? Does the applicant describe how the proposed services will be coordinated and how they fit into the existing substance abuse and violence prevention service system provided by other organizations and agencies? Does the applicant describe youth and community input into program design and/or implementation? Does the applicant describe how it will work with its local Regional Prevention Center?

F. Budget and Budget Narrative

Is a detailed budget included? Does the applicant include a comprehensive budget narrative that clearly explains the budget form, and that reflects the program goals and is realistic? Does the applicant describe its ability to leverage structural and financial resources within the community, including support from the private sector? Does the applicant describe its ability to track, manage and administer federal grant funds? Does the applicant describe its plans for sustaining the program beyond the grant period?

G. Required Documentation

Does the applicant include:

- Checklist
- Face Page
- Certification Regarding Lobbying
- Certification Regarding Environmental Tobacco Smoke
- Copy of negotiated indirect cost agreement, if applicable
- Table of Contents
- Original plus six (6) copies: numbered, single-sided, unbound, unstapled
- No attachments or brochures

SECTION IV: ATTACHMENTS

A. Application Checklist

B. Application Forms

- B-1 Face Page
- B-2 Work Plan
- B-3 Program Budget (detail)
- B-4 Program Budget Summary
- B-5 Budget Narrative; Justification, Financial Capacity, and Sustainability

C. Reporting Requirements

- C-1 Monthly Expenditure Reports and Reimbursement Requests - Instructions
- C-2 Monthly Expenditure Reports and Reimbursement Requests – Forms
- C-3 Quarterly Progress Reports – Instructions
- C-4 Quarterly Progress Reports – Narrative Form
- C-5 Quarterly Progress Reports – Demographics Form
- C-6 Workplan/Progress Report Guidance

D. Certifications

- D-1 Certification Regarding Lobbying
- D-2 Certification Regarding Environmental Tobacco Smoke

E. Subgrant Terms and Assurances

F. Risk and Protective Factor Information

G. Regional Prevention Center Contact Information

ATTACHMENT A
Governor's Safe and Drug Free Schools and Communities Program

Application Checklist

Please check the following components that are required for a complete application. Incomplete applications will be disqualified without further review. An original and six (6) copies of your applications must be submitted.

Are the following components included in this application?

- ☐ Signed, completed Face Page
- ☐ Application Table of Contents
- ☐ Agency Description
- ☐ Justification of Proposed Program
- ☐ Plan of Operation
- ☐ Plan of Evaluation
- ☐ Plan of Collaboration
- ☐ Budget/Budget Justification
- ☐ Required Documentation
 - ☐ Signed Certification Regarding Lobbying
 - ☐ Signed Certification Regarding Environmental Tobacco Smoke
 - ☐ Copy of negotiated indirect cost agreement, if applicable

ATTACHMENT B-1
Governor's Safe and Drug Free Schools and Communities Program

Face Page

A. Identify correct mailing address, fiscal agent and project director of the proposed program.

Applicant Organization: _____

Federal Tax Identification Number: _____

Address: _____ City/Zip: _____

Phone: _____ Fax: _____

Contact Person or Project Director

Name _____

Title _____

Address _____

City/Zip _____

Phone _____

Email _____

Financial Officer

Name _____

Title _____

Address _____

City/Zip _____

Phone _____

Email _____

B. Project Title: List the name of the proposed program.

C. Proposal Abstract: Briefly summarize the proposed project, including: target population(s), goals, objectives, outcomes and services to be provided.

D. By submitting and signing this application, the applicant agrees that if a subgrant is awarded, it will operate the program as described in the application in accordance with the Subgrant Terms and Assurances (Attachment E).

Signature of authorized official: _____

Typed name of authorized official: _____

Date: _____ Title: _____

ATTACHMENT B-2
Governor's Safe and Drug Free Schools and Communities Program

Work Plan

Agency and Program: _____

Page ____ **of** ____

Goal: _____

Objective(s)	Outcome(s)	Activities	Time Line (Implementation Plan)	Responsible Staff	Evaluation Plan
			Start Date / End Date		

ATTACHMENT B-3

Governor's Safe and Drug Free Schools and Communities Program

Program Budget

Applicants must prepare a detailed project budget, using the format below.

A. Personal Costs

Costs in this category include staff (fringe benefits, FICA, retirement). Indicate percentage of fringe benefits here and in narrative. Include position title and salary for each staff to be paid for through project.

Position of Person	Annual Salary	No. Mo. Budget	% of Time	Source of Funds	
				Applicant & Other (Identify)	Requested from SDFSC
% of Fringe					
Grand Total Personal Costs					

B. Operating Expenses

Costs in this category include: postage, printing, copying, utilities, office supplies, repair and maintenance costs.

Operating expenses by category	Source of Funds	
	Applicant & Other (Identify)	Requested from SDFSC
Grand Total		

C. Travel

Estimate the total travel costs associated with this grant (e.g. lodging, meals, mileage, etc.) Budget should include estimated number of miles @ 37.5 cents per mile.

Itemize Trip and Location	Number of Days/Miles	Rate of Reimbursement	Source of Funds	
			Applicant & Other (Identify)	Requested from SDFSC
Grand Total				

D. Other Direct Costs

Please include any costs that may not be included in the above categories and explain their relationship to the project (e.g. rental of other facilities for the program, incentive funds for program participation, equipment rental for program, etc.)

Other Expenses	Source of Funds	
	Applicant & Other (Identify)	Requested from SDFSC
Grand Total		

ATTACHMENT B-4

Governor's Safe and Drug Free Schools and Communities Program

Program Budget Summary

Enter all budget category totals for "Funds Requested" from Attachment B-3 in the appropriate line items in the "Safe and Drug Free Schools and Communities" funds column (column B) of the Program Budget Summary. Enter any other program revenue sources from other funding streams in columns C through F on the Program Budget Summary form. Sum up all program cost categories across funding streams and enter totals across the bottom of the table, as well as in column G.

Agency/Organization:						
Program Title:		Amount Requested:		Program Beginning Date:		Program Ending Date:
A Cost Categories/Source	B Safe and Drug Free Schools and Communities	C Other Federal Funds	D Other State Funds	E Client Fees	F Other Funding	G Total Project Budget
Personal Services						
Operations						
Travel						
Other Expenses						
Totals						

ATTACHMENT B-5

Governor's Safe and Drug Free Schools and Communities Program

Budget Narrative

I. Budget Narrative:

Provide supportive description and justification for each budgeted line item.

A. Personal Services

B. Operations

C. Travel

D. Other Expenses

II. Ability to Leverage Resources:

Describe the applicant organization's ability to leverage structural and financial resources at the community and private sector levels.

III. Financial Management:

Describe the applicant organization's ability to track, manage and administer federal grant funds.

IV. Sustainability:

Describe plans for sustaining the program beyond the grant period.

ATTACHMENT C-1

Governor's Safe and Drug Free Schools and Communities Program

Monthly Expenditure Report and Reimbursement Request - Instructions

NOTE: All programs must complete **monthly** payment requests for reimbursement of the expenses incurred related to the grant services. Copies of the two forms, BH - 4a (PRV-SDFSC) and BH-1 (PRV-SDFSC), follow this page.

I. BH – 4a (PRV-SDFSC): Expense Reimbursement Document

A. Complete the spaces provided for:

- 1). **Agency/Program** – descriptive name of agency
- 2). **Month/Year** – indicate last day of month in which services were rendered (e.g. 12/31/04)
- 3). **Grant/Contract Number** – grant or contract number for which payment is being requested
- 4). **Mental Health/Substance Abuse** – check appropriate box

B. Complete the columns:

- 1). **Current Month's Expenses** – indicate the amount of allowable expenses that are being requested in each category
- 2). **Total of Prior Expenses Billed** – add all total prior requests for this project for the year and indicate the total in the space provided
- 3). **Total Expenses Billed To Date** – this is the total of columns B and C, and represents the total reimbursed by state administered funds to the project as of the end of the specific reporting month
- 4). **Approved Budget Total** – Indicate from your most recent approved budget (or budget adjustment) the approved amounts for each of the categories from the funding award

C. Complete Signatures:

- 1). An original signature from the Agency Director or Business Manager must be affixed at the signature line.
- 2). The name and title of the person submitting the payment request should be typed or printed in the spaces provided at the lower right hand side of the form below the signature line.
- 3). The Expense Reimbursement Document must be dated in the space provided to the right of the name/title line for the signatory.

II. BH – 1 (PRV-SDFSC): Agency Total

A. Complete the spaces provided for:

- 1). **Agency/Program** – descriptive name of agency
- 2). **Month/Year** – indicate last day of month in which services were rendered (e.g. 12/31/04)
- 3). **Grant/Contract Number** – grant or contract number for which payment is being requested

B. Complete the columns:

- 1). **Total Reimbursement Request/Substance Abuse Total Funds (Column C)** - indicate the total amount of allowable expenses that are being requested.
- 2). **Total Reimbursement Request/NFFS Total (Column D)** - same as column C

C. Signatures:

- 4). An original signature from the Agency Director or Business Manager must be affixed at the signature line.
- 5). The name and title of the person submitting the payment request should be typed or printed in the spaces provided at the lower right hand side of the form below the signature line.
- 6). The Expense Reimbursement Document must be dated in the space provided to the right of the name/title line for the signatory.

III. Expenditure Reports should be sent to:

Faith Mills
Office of Mental Health, Substance Abuse and Addiction Services
Nebraska Health and Human Services
P.O. Box 98925
Lincoln, NE 68509-8925.

ATTACHMENT C-2

Governor's Safe and Drug Free Schools and Communities Program

Monthly Expenditure Report and Reimbursement Request – Forms

The following required Expenditure Report and Reimbursement forms are included in this application kit:

BH –4a (PRV-SDFSC): Expense Reimbursement Document

BH-1 (PRV-SDFSC): Agency Total

BH – 4a (PRV-SDFSC)
EXPENSE REIMBURSEMENT DOCUMENT
Behavioral Health Services Reimbursement Report

Department of Health and Human Services

Office of Mental Health, Substance Abuse and Addiction Services

AGENCY: _____

MONTH/YEAR: _____

SERVICE: Gov. Safe & Drug Free Schools & Communities Program

GRANT/CONTRACT #: _____

 Mental Health **X** Substance Abuse
(Check one)

A	B	C	D	E
EXPENSE CATEGORY	CURRENT MONTH'S EXPENSES	TOTAL OF PRIOR EXPENSES BILLED	TOTAL EXPENSES BILLED TO DATE	APPROVED TOTAL BUDGET (FY 2005)
Personal Services				
Operations				
Travel				
Other Expenses				
TOTALS				

Signature: Agency Director or Business Manager

Typed/Printed Name and Title of Signatory

Date

Signature: Prevention Program Manager

Date:

BH – 1 (PRV-SDFSC)
AGENCY TOTAL

Behavioral Health Services Reimbursement Report

Department of Health and Human Services

Office of Mental Health, Substance Abuse and Addiction Services

AGENCY: _____

MONTH/YEAR: _____

SERVICE: Gov. Safe & Drug Free Schools & Communities Program

GRANT/CONTRACT #: _____

	A	B	C	D
I. NON FEE FOR SERVICE	BH Carryover Total Funds	Mental Health Total Funds	Current Reimburse- ment Request	Cumulative Reimburse- ment Request
Safe and Drug Free Schools and Communities				
TOTAL REIMBURSEMENT REQUEST				

NOTE: This form must be completed and attached as a cover sheet to the BH-4a (PRV-SDFSC) “Expense Reimbursement Document” form

Signature: Agency Director

Typed/Printed Name and Title of Signatory

Date

CODING: SDFSC						
Grant #	Agency	Program	Sub-Prog.	Fund	Business Unit	Amount
S186B0300550	26	38	15	40000	26910087	

Signature: Prevention Program Manager

Date

ATTACHMENT C-3

Governor's Safe and Drug Free Schools and Communities Program

Quarterly Progress Report - Instructions

All programs must complete quarterly Progress Reports on the supplied Progress Report format (Attachment C-4: "Progress Toward Goals, Objectives and Outcomes"; and Attachment C-5: "Numbers Served" form).

Reports are due at the Office of Mental Health, Substance Abuse and Addiction Services and should be submitted to:

**Faith Mills
Office of Mental Health, Substance Abuse and Addiction Services
Nebraska Health and Human Services
P.O. Box 98925
Lincoln, NE 68509-8925.**

Progress Reports must be submitted by 5:00pm on the following dates:

- **February 15, 2005** – For the period December 1, 2004 to January 31, 2005
- **May 16, 2005** – For the period February 1, 2005 to April 30, 2005
- **August 15, 2005** – For the period May 1, 2005 to July 31, 2005
- **October 15, 2005** - For the period August 1, 2005 to September 30, 2005

Failure to demonstrate progress toward grant objectives or to submit reports in a timely manner could result in the suspension or termination of funding.

NOTE:

Additional guidance for completing the Quarterly Progress Report
is provided in Attachment C-6:
"Subgrantee Work Plan / Progress Report Guidance".

ATTACHMENT C-4

Governor's Safe and Drug Free Schools and Communities Program

Quarterly Progress Report – Narrative Form

Progress Toward Goals and Objectives

Complete for each goal and related objective(s) and outcome(s)

AGENCY AND PROGRAM: _____

FY: 2004-2005 **Report Period:** ____ Quarter 1 ____ Quarter 2 ____ Quarter 3 ____ Quarter 4

I. GOAL:

II. OBJECTIVE(S):

III. OUTCOME(S):

IV. PROBLEMS IDENTIFIED:

V. STEPS TAKEN TO RESOLVE THE PROBLEM:

VI. ADDITIONAL COMMENTS:

ATTACHMENT C-5

Governor's Safe and Drug Free Schools and Communities Program

Quarterly Progress Report – Demographic Form

Numbers Served

(Complete quarterly and submit as part of your Quarterly Report)

AGENCY AND PROGRAM: _____

FY: 2004-2005 **Report Period:** ____ Quarter 1 ____ Quarter 2 ____ Quarter 3 ____ Quarter 4

	Total # Unduplicated Persons Served in Previous Quarters	Total # <u>New</u> Unduplicated Persons Served this Quarter	Total # Unduplicated Persons Served to Date
Age of Program Participants	A	B	A + B
0 - 4 years			
5 – 9 years			
10 – 12 years			
13 – 15 years			
16 – 18 years			
19 years and older			
Total Numbers Served by Age			
Race and Ethnicity of Participants	A	B	A + B
American Indian/Alaska Native			
Asian/Pacific Islander			
Black/African American, not Hispanic			
Hispanic			
White, not Hispanic			
Bi- or Multi-Racial			
Total Numbers Served by Race & Ethnicity			
Gender	A	B	A + B
Male			
Female			
Total Numbers Served by Gender			

ATTACHMENT C-6

Governor's Safe and Drug Free Schools and Communities Program

Subgrantee Work Plan/Progress Report Guidance

Material adapted from "Planning for Prevention: An Evidence-Based Toolkit for Effective Substance Abuse Planning," a draft document produced by the Southwest Center for the Application of Prevention Technology and the Nebraska Health and Human Service System's Office of Mental Health, Substance Abuse and Addiction Services.

I. GOALS

Goals are general statements of intended accomplishment, which describe the kinds of changes—or **outcomes**—that you want to achieve. In substance abuse and violence prevention, **goals** are almost always related to *behavior* change. That is because the ultimate goal of those prevention efforts is to decrease the rate of substance use—a behavior. In working with individuals, **goals** should always focus on changes you are attempting to facilitate in people's *behavior*. However, if your initiative is aimed at affecting changes in a system (e.g. prevention system, school system, judicial system, etc.) there are many areas of change that you may focus on in developing **goals**, including behavior, physical conditions, degree of justice, or efficiency.

Example Goal: *Decrease alcohol use by high school youth.*

Hint #1: Be careful *not* to choose goals that you don't have the capacity to measure. If you have no way to monitor whether or not the goal is being achieved, then you shouldn't choose it as a goal!

Hint #2: It is best to limit the number of program goals to three or fewer. If you find you have many more goals than that, it is probably a sign that you are trying to do too much.

II. OBJECTIVES

Objectives are specific statements of intended accomplishment that are designed to assist in achieving the program goal. Objectives address the *underlying conditions* that either contribute to—or protect against—substance use (i.e. **risk and protective factors**). Programs focusing on changing individual or group behavior should focus on developing objectives that are aimed at decreasing risk factors and increasing protective factors. For those involved in broader, systematic prevention planning efforts, objectives might not address risk and protective factors. Instead, they may encompass issues related to systems and infrastructure (e.g., workforce development, leveraging of resources, etc.). In either case, there should always be a direct and logical link between a program's goals and its objectives.

Example Objectives:

- *Decrease favorable attitudes among high school youth toward underage drinking.*
(Risk factor: Favorable attitudes towards the problem behavior)
- *Decrease number of parents who allow high-school-aged youth to drink at their home.*
(Risk Factor: Parental attitudes and involvement in the problem behavior)

Hint #1: Consider what you will need to do to measure the objective. If it is too hard to measure, you should discard it.

Hint #2: The more specific the objective the better. If you avoid ambiguous or general language in developing your objective in the beginning, it will be easier to evaluate the effectiveness of your program later

III. OUTCOMES

Outcomes are very specific, measurable and time-limited statements that describe exactly how much change will be produced by the accomplishment of a goal. Outcomes include three important components:

1. **Performance Standards** - the degree of change to be accomplished
2. **Time Frames** – the timelines (or deadlines) for achieving immediate, intermediate and long-term outcomes
3. **Sentence Construction** – a standard format for expressing outcomes
 - a) **To** (action verb) (statement reflecting objective) **by** (performance standard) **by** (deadline)

*Ex: **To** (decrease)(the number of high school students who report favorable attitudes toward underage drinking) **by** (50%) **by** (September 30, 2005)*

Example Outcome: *To decrease the number of high school students who report favorable attitudes toward underage drinking) by 50% by September 30, 2005*

a) **By** (deadline), **the** (action verb) (statement reflecting objective) **will** (performance standard)
*Ex: **By** (September 30, 2005), **the** (number of parents who allow their children or other minors to drink alcohol at their home) **will** (decrease by 20%)*

Example Outcome: *By September 30, 2005, the number of parents who allow their children or other minors to drink alcohol at their home will decrease by 20%. (Risk Factor: Parental attitudes and involvement in the problem behavior)*

Because community level prevention efforts tend to focus on behavioral changes, which are **long-term outcomes**, it is important to also develop **intermediate** and **immediate outcomes**. When goals are related to behavior change, **immediate outcomes** deal with changes in knowledge or skills, and **intermediate outcomes** deal with changes in risk and protective factors.

Community-wide (or environmental) changes are associated with behavior change for the entire population which requires **long-term outcomes**. In this case, **immediate outcomes** will involve such things as changes in policies, practices, procedures, population knowledge and population skills. **Intermediate outcomes** will involve population-level risk and protective factors such as community norms, values and attitudes.

Hint #1: Outcomes are different from **outputs**. While outcomes are descriptions of the extent of change that is hoped for, outputs are quantitative measures of concrete activities or processes (e.g., number of meetings attended; number of participants who showed up).

Hint #2: When writing outcomes, it is important to be “SMART”:

- Specific
- Measurable
- Achievable
- Related to the objective
- Time Limited

IV. ACTIVITIES

Activities are the specific actions that are implemented as part of an overall strategy to achieve the outcome envisioned by the program’s goal(s) and objective(s). Program activities result in **outputs**, which are quantifiable measures that provide a means for measuring the concrete effects of an activity.

Example Activity: *A media campaign will be conducted to dispel the myth among parents that underage drinking is a rite of passage, and to discourage parents from allowing youth to drink alcohol at home.*

Example Output: *The media campaign will feature 1,600 radio and television spots over a 16 county area, reaching an estimated 50,000 parents.*

V. TIME LINES (Work Plan only)

An **implementation plan** is the series of planned program **activities**, laid out in chronological order, that need to take place in order for the prevention plan to move forward. The **implementation plan** lays out the order of the **activities** intended to be carried out, and identifies the resulting **outputs** to be tracked for each activity.

The easiest way to develop an implementation plan is to create a **time line** for carrying out each step of the plan. The time line should include times (if possible), dates, and places. Although time lines can be written in a narrative form, charting activities on a calendar can help in visualizing the plan more easily.

VI. EVALUATION

Evaluation is ongoing measurement of progress in implementing strategies and achieving outcomes. Successful evaluation includes both **process/quantitative** (documenting program implementation issues: e.g. number of recipients/participants, number of educational sessions, number, materials distributed, etc) and **outcome/qualitative** (documenting the outcomes achieved: e.g. changes in behaviors, etc.). Evaluation planning is an essential part of initial program design, and requires good baseline data at the outset.

Example Evaluation Plan Component: *Conduct a pre- and post- survey of parents residing within the 16 county area covered by the media campaign to: 1) determine the campaign's audience reach, (process) and 2) determine the degree of change, if any, in parental behaviors related to allowing youth to drink alcohol at home (outcome).*

VII. PROBLEMS IDENTIFIED (Progress Report only)

A good evaluation design will assist in the early discovery, and resolution, of areas of concern and/or barriers to effective implementation of your strategy.

Example of an Identified Problem: *Although there are significant numbers of non-English speaking Hispanic families in the targeted 16 county area, the media campaign and it's associated baseline survey were conducted only in English, resulting in decreased exposure among Hispanic parents.*

VIII. PLANS TO RESOLVE THE PROBLEM (Progress Report only)

Ongoing evaluation allows for continuous improvement of program implementation and progress toward outcomes. Potential solutions may include making special accommodations for targeted populations, or revising goals, objectives, outcomes and/or activities.

Example of a Plan to Resolve a Problem: *A partnership with Hispanic radio stations and television stations that feature Hispanic programming will enable the creation and dissemination of Spanish-language versions of the media campaign's television and radio spots. The baseline survey of parental attitudes has been translated into Spanish, and will be conducted among Hispanic households in the area. The post-survey will also be translated into Spanish and administered to those households after the conclusion of the campaign.*

IX. ADDITIONAL COMMENTS (Progress Report only)

This section is to be used to provide information pertinent to the effective and timely achievement and completion of program goals, objectives, outcomes and activities. This section may include notification of staff or administrative/procedural changes and technical assistance needs.

SUMMARY OF EXAMPLES USED IN THIS SECTION

Goal: *Decrease alcohol use by high school youth.*

Objective: *Decrease number of parents who allow high-school-aged youth to drink at their home. (Risk Factor: Parental attitudes and involvement in the problem behavior)*

Outcome: *By September 30, 2005, the number of parents who allow their children or other minors to drink alcohol at their home will decrease by 20%.*

Activity: *A media campaign will be conducted to dispel the myth among parents that underage drinking is a rite of passage, and to discourage parents from allowing youth to drink alcohol at home.*

Output: *The media campaign will feature 1,600 radio and television spots over a 16 county area, reaching an estimated 50,000 parents.*

Evaluation Plan Component: *Conduct a pre- and post- survey of parents residing within the 16 county area covered by the media campaign to 1) determine the campaign's audience reach, (process) and 2) determine the degree of change, if any, in parental behaviors related to allowing youth to drink alcohol at home (outcome).*

Identified Problem: *Although there are significant numbers of non-English speaking Hispanic families in the targeted 16 county area, the media campaign and it's associated baseline survey were conducted only in English, resulting in decreased outcomes among Hispanic parents.*

Plan to Resolve a Problem: *A partnership with Hispanic radio stations and television stations that feature Hispanic programming will enable the creation and dissemination of Spanish-language versions of the media campaign's television and radio spots. The baseline survey of parental attitudes has been translated into Spanish, and will be conducted among Hispanic households in the area. The post-survey will also be translated into Spanish and administered to those households after the conclusion of the campaign.*

ATTACHMENT D-1

Governor's Safe and Drug Free Schools and Communities Program

Certification Regarding Lobbying

The undersigned certifies, to the best of his or her knowledge and belief that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was place when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signature of authorized official signing on behalf of
applicant organization

Date

Name and title of official signing for organization

Organization name

ATTACHMENT D-2

Governor's Safe and Drug Free Schools and Communities Program

Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such federal funds. The law does not apply to children's services provided in private residences; portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable Federal funds is Medicare or Medicaid; or facilities where WIC coupons are redeemed. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing this certification, the applicant/subgrantee certifies that the submitting organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

Signature of authorized official signing on
behalf of applicant/subgrantee

Date

Name and title of official signing for organization

Organization name

ATTACHMENT E
Governor's Safe and Drug Free Schools and Communities Program

Subgrant Terms and Assurances

STATE OF NEBRASKA
NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES.
SUBGRANT TERMS and ASSURANCES

This is a subgrant of federal financial assistance. By accepting this subgrant, the Subrecipient agrees to comply with the terms and conditions described herein.

- A. Programs. Subrecipient must operate the program(s) in compliance with the documents governing the award. The following documents and any revisions made during the program period govern the Subgrant and are hereby incorporated by this reference as though fully set forth herein.
- 1). The Department's Request for Application;
 - 2). Subrecipient Project(s) Application;
 - 3). Subrecipient Reporting Requirements (Attachments C-1 through C-6);
 - 4). Program Specific Requirements (Section II, C.3);
 - 5). Certifications (Attachments D-1 and D-2); and
 - 6). Department's funding award which includes the award period, amount of funds awarded, and any contingencies to the Subgrant award.
- B. Reports. Subrecipient must submit data, program, and financial reports according to the reporting requirements (Attachments C-1 through C-6). Extensions for the submission of reports and reimbursement **must be submitted in writing** to the Department for approval to prevent withholding of payment.
- C. Administrative Requirements. Subrecipient must perform Subgrant activities, expend funds, and report financial and program activities in accordance with Federal grants administration regulations and U.S. Office of Management and Budget Circulars governing cost principles, and comply with, complete, and return the certifications attached hereto.
- D. Program Specific Requirements. Subgrant activities must comply with any program specific requirements included in the Department's Request for Application (Section II, C.3).
- E. Nondiscrimination. The Subrecipient acknowledges that the Subgrant activities must be operated in compliance with civil rights laws and any implementing regulations, and makes the following assurances.
- 1). The Subrecipient warrants and assures that it complies as applicable with:
 - a) Title VI of the Civil Rights Act of 1964,
 - b) Title IX of the Education Amendments of 1972,
 - c) Section 504 of the Rehabilitation Act of 1973,
 - d) the Age Discrimination Act of 1975,
 - e) the Americans with Disabilities Act of 1990, to the effect that no person shall, on the grounds of race, color, national origin, sex, age, handicap or disability, be excluded from participation in, denied benefits of, or otherwise be subjected to discrimination under any program or activity for which the Subrecipient receives federal financial assistance.
 - 2). Alcohol and Drug Abuse Prevention Programs: The Subrecipient and any of its subcontractors shall not discriminate against any employee or applicant for employment, to be employed in the performance of this Subgrant with respect to hire, tenure, terms, conditions or privileges of employment because of the race, color, religion, sex, disability or national origin of the employee or applicant.

F. Reimbursement: Subrecipient must submit claims for reimbursement for actual, allowable, allocable and reasonable expenditures in accordance with the approved budget. The Department will make reimbursement, subject to the following conditions:

- 1). Subrecipient's submission of reports according to the reporting requirements described in Attachments C-1 through C-6.
- 2). Availability of governmental funds to support this project. In the event funds cease to be available, this Subgrant shall be terminated, or the activities shall be suspended until such funds become available, in the sole discretion of the Department.
- 3). Pursuant to the Nebraska Prompt Payment Act.
- 4). Suspension or termination for cause or convenience as described in the federal grants administration regulations applicable to the Subrecipient.

G. Budget Changes. The Subrecipient is permitted to reassign funds from one line item to another line item within the approved budget. Prior approval by the Department is not required provided the cumulative transfers do not exceed ten percent of the total approved budget, are for an allowable cost allocable to the Subgrant, do not add or eliminate a line item and do not result in programmatic changes.

Prior approval is required for cumulative budget transfers exceeding ten percent of the current total approved budget. Requests for transfers shall be addressed in writing to the Department. The Department shall approve or disapprove the request in writing within 30 days of its receipt.

H. Programmatic changes. The Subrecipient shall request in writing Department approval for programmatic changes. The Department shall send a written determination regarding the request to the Subrecipient within 30 days of its receipt.

I. Technical Assistance. The Department will provide training and materials, procedures, assistance with quality assurance procedures, and site visits by representatives of the Department and the federal granting agency in order to review program accomplishments, evaluate management control systems and other technical assistance as needed or requested.

J. Subrecipient Procurement. Subrecipient shall be the responsible authority regarding the settlement and satisfaction of all contractual and administrative issues, without recourse to Department, arising out of procurement entered into by it in connection with the subgrant. Such issues include, but are not limited to, disputes, claims, protests of award, source evaluation and other matters of a contractual nature.

K. Subgrant Close-Out. Upon the expiration or notice of termination of this Subgrant, the following procedures shall apply for close-out of the subgrant:

- 1). Upon request from Subrecipient, any allowable reimbursable cost not covered by previous payments shall be paid by Department.
- 2). Subrecipient shall make no further disbursement of funds paid to Subrecipient, except to meet expenses incurred on or prior to the termination or expiration date, and shall cancel as many outstanding obligations as possible. Department shall give full credit to Subrecipient for the federal share of non-cancelable obligations properly incurred by Subrecipient prior to termination.
- 3). Subrecipient shall immediately return to Department any unobligated balance of cash advanced or shall manage such balance in accordance with Department instructions.
- 4). Within a maximum of 30 days following the date of expiration or termination, Subrecipient shall submit all financial, performance and related reports required by the terms of the Agreement to the Department. The Department reserves the right to extend the due date for any report and may waive, in writing, any report it considers to be unnecessary.
- 5). Department shall make any necessary adjustments upward or downward in the federal share of costs.
- 6). The Subrecipient shall assist and cooperate in the orderly transition and transfer of subgrant activities and operations with the objective of preventing disruption of services.

- 7). Close-out of this Subgrant shall not affect the retention period for, or state or federal rights of access to, Subrecipient records. Nor shall close-out of this Subgrant affect the Subrecipient's responsibilities regarding property or with respect to any program income for which Subrecipient is still accountable under this Subgrant. If no final audit is concluded prior to close-out, the Department reserves the right to disallow and recover an appropriate amount after fully considering any recommended disallowances resulting from an audit which may be conducted at a later time.
- L. Documents Incorporated by Reference. All laws, rules, regulations, guidelines, directives and documents, attachments, appendices, and exhibits referred to in these terms and assurances shall be deemed incorporated by this reference and made a part of this Subgrant as thought fully set forth herein.
- M. Independent Contractor. The Subrecipient is an independent contractor and neither it nor any' of its employees shall be deemed employees of the Department for any purpose. The Contractor shall employ and direct such personnel as it requires to perform its obligations under this Subgrant, shall exercise full authority over its personnel, and shall comply with all worker's compensation, employer's liability, and other federal, state, county, and municipal laws, ordinances, rules, and regulations required of an employer providing services as contemplated by this Subgrant.
- N. Release and Indemnity. The Subrecipient shall assume all risk of loss and hold the Department, its employees, agents, assignees and legal representatives harmless from all liabilities, demands, claims, suits, losses, damages, causes of action, fines or judgments and all expenses incident thereto, for injuries to persons and for loss of, damage to, or destruction of property arising out of or in connection with this Subgrant, and proximately caused by the negligent or intentional acts or omissions of the Subrecipient, its officers, employees or agents; for any losses caused by failure by the Subrecipient to comply with terms and conditions of the Subgrant; and, for any losses caused by other parties which have entered into agreements with the Subrecipient.
- O. Drug-Free Work-Place Policy. The Subrecipient assures the Department that it has established and does maintain a drug-free work-place policy.
- P. Acknowledgment of Support. Publications by the Subrecipient, including news releases and articles, shall acknowledge the financial support of the Department and the federal granting agency by including a statement therein that, **"This project is supported in part by federal Safe and Drug Free Schools and Communities funds awarded to the Subrecipient by the Governor's Office and the Nebraska Department of Health and Human Services."**
- Q. Copyright. The Subrecipient may copyright any work that is subject to copyright and was developed, or for which ownership was purchased, under an award. The federal awarding agency and the Department reserve a royalty-free, nonexclusive and irrevocable right to reproduce, publish, or otherwise use the work for Federal and State purposes, and to authorize others to do so.
- R. Notices. All notices given under the terms of this Subgrant shall be sent by United States mail, postage prepaid, addressed to the respective party at the address set forth on the signature page hereof, or to such other addresses as the parties shall designate in writing from time to time.
- S. Authorized Official. The person executing the Application Cover Sheet is an official of the Subrecipient who has the authority to bind the Subrecipient to the terms and assurances of this Subgrant of federal financial assistance.

ATTACHMENT F

Governor's Safe and Drug Free Schools and Communities Program

Risk and Protective Factor Information

This list is based upon the research of J. David Hawkins and Richard F. Catalano, University of Washington, and was adapted from "Developing Healthy Communities: A Risk and Protective Factor Approach to Preventing Alcohol and Other Drug Abuse," Developmental Research and Program, Inc., 130 Nickerson, Suite 107, Seattle, WA 98109, (800) 736-2630)

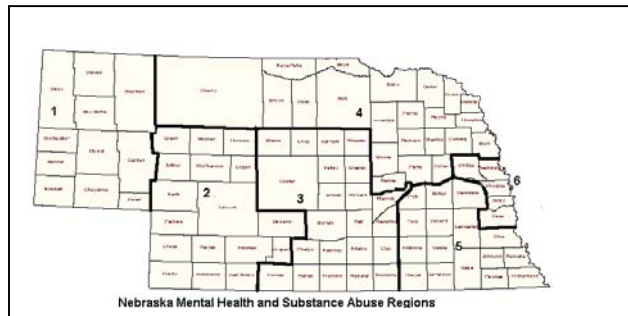
DOMAIN	RISK FACTORS	PROTECTIVE FACTORS
Individual/ Peer	<ul style="list-style-type: none"> • Alienation and rebelliousness • Friends who engage in the problem behavior • Favorable attitudes towards the problem behavior • Early initiation of the problem behavior 	<ul style="list-style-type: none"> • Peer Bonding: ✓ Meaningful opportunities to contribute to the peer group ✓ Skills to successfully take advantage of those opportunities ✓ Recognition/ acknowledgement of efforts
Family	<ul style="list-style-type: none"> • Family history of high-risk behavior • Family management problems • Family conflict • Parental attitudes and involvement in the problem behavior 	<ul style="list-style-type: none"> • Family Bonding: ✓ Meaningful opportunities to contribute to the family ✓ Skills to successfully take advantage of those opportunities ✓ Recognition/ acknowledgement of efforts
School	<ul style="list-style-type: none"> • Early and persistent antisocial behavior • Academic failure beginning in elementary school • Low commitment to school 	<ul style="list-style-type: none"> • School bonding: ✓ Meaningful opportunities to contribute to the school community ✓ Skills to successfully take advantage of those opportunities ✓ Recognition/ acknowledgement of efforts
Community	<ul style="list-style-type: none"> • Availability of drugs • Community laws and norms favorable toward drug use • Transition and mobility • Low neighborhood attachment and community disorganization • Extreme economic and social deprivation 	<ul style="list-style-type: none"> • Community Bonding: ✓ Meaningful opportunities to contribute to the community ✓ Skills to successfully take advantage of those opportunities ✓ Recognition/ acknowledgement of efforts

Note: The protective factors that have been validated by Hawkins' and Catalano's research all relate to *bonding*. To build bonding, three conditions are necessary: **opportunities**, **skills** and **recognition**. According to Hawkins and Catalano:

"Positive bonding makes up for many other disadvantages caused by other risk factors or environmental characteristics. Children who are attached to positive families, friends, school, and community, and who are committed to achieving the goals valued by these groups are less likely to develop problems in adolescence. Studies of successful children who live in high-risk neighborhoods or situations indicate that strong bonds with a caregiver can keep children from getting in trouble. Children must be provided with **opportunities** to contribute to their community, family, peers and school. The challenge is to provide children with meaningful opportunities that help them feel responsible and significant. Children must be taught the **skills** necessary to effectively take advantage of the opportunity they are provided. If they don't have the necessary skills to be successfully, they experience frustration and/or failure. Children must also be **recognized** and acknowledged for their efforts. This gives them the incentive to contribute and reinforces their skillful performance."

ATTACHMENT G
Governor's Safe and Drug Free Schools and Communities Program

Regional Prevention Center Contact Information



Region I

Panhandle Substance Abuse Council

Barbara Jolliffe, Director
1517 Broadway, Suite 124
Scottsbluff, NE 69361
(308) 632-3044 (phone)
(308) 632-6703 (fax)

Serving: Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Scotts Bluff, Sheridan and Sioux Counties.

Region II

Region II Human Services

Marlo Roberts, RPC Director
P.O. Box 1208
110 North Bailey
North Platte, NE 69103
(308) 534-0440 (phone)
(308) 534-6961 (fax)

Serving: Arthur, Chase, Dawson, Dundy, Frontier, Gosper, Grant, Hayes, Hitchcock, Hooker, Keith, Lincoln, Logan, McPherson, Perkins, Red Willow and Thomas Counties.

Region III

Region III Behavioral Health Services

Kay McMinn, RPC Director
P.O. Box 2555
4009 6th Avenue, Suite 65
Kearney, NE 68848
(308) 237-5113 (phone)
(308) 236-7669 (fax)

Serving: Adams, Blaine, Buffalo, Clay, Custer, Franklin, Furnas, Garfield, Greeley, Hall, Hamilton, Harlan, Howard, Kearney, Loup, Merrick, Nuckolls, Phelps, Sherman, Valley, Wheeler and Webster Counties.

Region IV

Prevention Pathways

Carmen Patent, Director
504 Prospect Avenue
Norfolk, NE 68701
(402) 370-3113 (phone)
(402) 370-3444 (fax)

Serving: Antelope, Boone, Boyd, Burt, Brown, Cedar, Cherry, Colfax, Cuming, Dakota, Dixon, Holt, Keya Paha, Knox, Madison, Nance, Pierce, Platte, Rock, Stanton, Thurston and Wayne Counties.

Region V

Region V Systems

Sandra Morrissey, RPC Director
1645 N Street, Suite A
Lincoln, NE 68508
(402) 441-4343 (phone)
(402) 441-4335 (fax)

Serving: Butler, Fillmore, Gage, Jefferson, Johnson, Lancaster, Nemaha, Otoe, Pawnee, Polk, Richardson, Saline, Saunders, Seward, Thayer and York Counties.

Region VI

Region VI Behavioral Healthcare

Justin Mickles, RPC Director
3801 Harney Street
Omaha, NE 68131
(402) 444-6573 (phone)
(402) 444-7722 (fax)

Serving: Cass, Dodge, Douglas, Sarpy and Washington Counties.